PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where in m

ndicated unless correcte maintenance fee notificat	d below or directed others.	nerwise in Block I, by (a				nd/or (b) indicating a sep			
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
21967	7590 04/13	/2009	•			_	mission		
SUITE 1200					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
					(Depositor's name)				
WASHINGTON	, DC 20006-1109					100-100-00-00-00-00-00-00-00-00-00-00-00		(Signature)	
			[(Date)	
APPLICATION NO.	FILING DATE	FILING DATE		OR	ATTORNEY DOCKET NO		CONFIRMATION NO.		
10/687,826 10/20/2003		Mark Alan Jackson			60497.000009	9915			
		MANUFACTURING FAC	PUBLICATION FEE DU		PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	: D4	ATE DUE	
APPLN, TYPE	SMALL ENTITY	S1510	L	JE I				7/13/2009	
nonprovisional			\$300		\$0	\$1810	07.	113/2009	
EXAMINER		ART UNIT	376-190000						
MARTINEZ, BRITTANY M 1. Change of correspondence address or indication of "Fe		1793	2. For printing on the	he nate	ent front page, list	Hunton (will:	iams LLI	
CFR 1.363).	(1) the names of up to 3 registered patent attorneys								
☐ Change of corresp Address form PTO/SI	ondence address (or Ch 3/122) attached.	ange of Correspondence	or agents OR, alterr		-	member a 2			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or	type))		4 .	- boom Glad for	
PLEASE NOTE: Uni	less an assignee is iden h in 37 CFR 3.11. Com	tified below, no assignee pletion of this form is NO	data will appear on th T a substitute for filing	e pate an as	ent. It an assigne signment.	e is identified below, the	iocument na	s been med for	
(A) NAME OF ASSI	(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
	l Electric		Schenect	-					
Please check the appropr	iate assignee category o	r categories (will not be p	rinted on the patent):	□ I	ndividual XXCor	poration or other private gr	oup entity	Government	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s):					(Please first reapply any previously paid issue fee shown above)				
Issue Fee	☐ Payment by credit card. Form PTO-2038 is attached.								
Publication Fee (N Advance Order -	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-020 Genclose an extra copy of this form).								
			overpayment, to D	eposi	t Account Number	50-020 Genciose	an extra copy	/ of this form).	
5. Change in Entity Sta	is SMALL ENTITY star	tus. See 37 CFR 1.27.				L ENTITY status. See 37 (
NOTE: The Issue Fee an	d Publication Fee (if re-	quired) will not be accepted	ed from anyone other the Office.	an the	applicant; a regis	tered attorney or agent; or	he assignee	or other party in	
mercar as shown by the	Teyler Ma	646			Date JUL	4 10,2009			
Authorized Signature	THE OF MO	ddry				40,074		——	
Typed or printed nam	e Tyrer Ma	adiy /					ad bu the LIC	PTO to process)	
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 22:	dianty is governed by 3 diapplication form to the ions for reducing this by /irginia 22313-1450. Dis 13-1450.	Solution of the USPTO. Time will varuate, should be sent to the ONOT SEND FEES OR	y depending upon the interest of the Chief Information O COMPLETED FORM	ndivio fficer S TO	dual case. Any con , U.S. Patent and C THIS ADDRESS	e public which is to file (a: inutes to complete, includ nments on the amount of I rademark Office, U.S. De SEND TO: Commissione isplays a valid OMB contr	nme you requestment of 0 r for Patents,	i, preparing, and wire to complete Commerce, P.O. P.O. Box 1450,	
Under the maperwork Re	ABCHOR ACLUI 1777, 110	peragra are required to re							